LAMAR UNIVERSITY

MCNAIR SCHOLARS PROGRAM

APPLICATION 2014-2015



Application Deadline: Wednesday, October 15, 2014

Applications can be sent electronically using this form or delivered to the McNair Scholars Program office in the Communication Building, Suite 106. Only completed applications will be accepted.







	PERSONAL INFORMATION									
Social Security	Number		Last Name	First Na	me	MI	DOB	Gender		
Mailing Address			Permanent Address							
NUMBER & STREET				NUMBER & STREET						
APARTMENT				APARTMENT						
CITY				CITY						
STATE			STATE							
ZIP CODE			ZIP CODE							
Telephone Number			Cell Phone	Number	E-mail Address					
Ci	tizenship	(Check o	one)*		Ethnic Bac	kgrour	nd			
United States Cit	izen or Na	tional		African-America	n/Black					
Permanent Unite	ed States R	lesident		□ Hispanic						
Permanent Guar	n, Norther	n Mariana	Islands, or Trust	Caucasian						
Territory of the Pac	cific Islands	s Resident		American Indian						
□ Freely Associate	d States Re	esident		Alaskan Native						
Other		Native Hawaiian								
			Native American Pacific Islander							
				🗆 Asian						
				Other						

*If you are not a United States citizen, please attach a copy of INS documentation:

FINANCIAL INFORMATION

Did someone claim you on his or her income taxes, such as a parent, or did you file independently and claim yourself? If someone else claimed you, fill out the 'Dependent' section; if you claimed yourself, fill out the 'Independent' section. * If you still have questions about your status, contact the LU Financial Aid Office.

Dependent	Independent
What size is your parents' household, including you?	What size is your household, including you, spouse, and/or other dependents?
Did your parents file a federal income tax return for the past year? □ YES □ NO	Did you file a federal income tax return for the previous year? □ YES □ NO
If yes , what was their taxable income? \$ If no , place a "0" on this line.	If yes , what was your taxable income? \$ If no , place a "0" on this line.

*Please attach a copy of the tax return to this application showing the taxable income claimed. Your application cannot be processed without a copy of this. If taxes were not filed, place a "0" on the taxable income line above.

All information requested in this application is used to determine the applicant's eligibility for the McNair Scholars Program. All information received is handledand treated with strict confidentiality. If you have any questions about this application, please speak with the McNair Program Director.

FAMILY EDUCATIONAL BACKGROUND												
Highest Educational Attainment of Mother (circle highest grade completed)												
Highest Grade Completed:	1	2	3	4	5	6	7	8	9	10	11	12
College Degree Earned:		Bach	nelor	′s		Mas	ster'	s		Docto	orate	
Highe	Highest Educational Attainment of Father (circle highest grade completed)											
Highest Grade Completed:	1	2	3	4	5	6	7	8	9	10	11	12
College Degree Earned:		Bach	nelor	′s		Mas	ster'	s		Docto	orate	

PROGRAM PARTICIPATION

Have you previously participated (or currently active) in any of the following programs?

- □ SSS (Student Support Services)
- □ INSPIRED (INcreasing Student Participation In REsearch Development)
- □ Lamar University Honors Program
- □ TALH (Texas Academy of Leadership in the Humanities)
- □ STAIRSTEP (Students Advancing through Involvement in Research Student Talent Expansion Program)

EDUCATIONAL INFORMATION								
Major Department College								
Cumulative GPA	Major GPA	Completed Semester Hours	Classification (FR, SOPH, JR, SR)					

What is your anticipated graduation date?			
Do you plan to attend graduate school?	Yes	🗆 No	□ Unsure
If unsure, why?			
Do you plan to obtain a Master's degree?			
Do you plan to obtain a Doctoral degree?			
If so, what is your intended graduate school discipline?			

What are your reasons for pursuing a doctorate?

What universities are you interested in applying to for graduate school?

Which of the following best describes your commitment to attend graduate school?

- $\hfill\square$ I am thinking about attending graduate school and would like to explore options.
- $\hfill\square$ I am attending graduate school after working one or two years.
- □ I have made a firm commitment to attend graduate school immediately after receiving my bachelor's degree.
- □ I have made a firm commitment to receive a master's degree, but I am unsure about a doctoral degree.
- $\hfill\square$ I definitely plan to receive my doctoral degree after graduating with a bachelor's degree.

This program is currently designed for students seeking Masters, PhDs, or combination MD/PhDs. We cannot accept students seeking strictly Law, Medical, or Pharmacy degrees at this time.

SUPPORT MATERIALS

In addition to the information you provided on this form, you must submit the following support materials to complete your application packet:

Personal Statement: *Your personal statement is a vital part of this application.* Please attach a typed, double-spaced essay of 300-500 words that describes your academic and career goals. Please explain why you are interested in obtaining a doctorate, the area you are interested in studying, and why you think that participating in the McNair Program can help you reach those goals. Describe any obstacles you have overcome, stretches you wish to make, challenges you foresee, and plans you have to meet those challenges. Be sure to communicate how committed you are to achieving those goals.

Writing Sample: Please include an academic essay from any one of your previous courses at Lamar. If you are a transfer student, you may use an essay from that university. Choose an essay that you feel best highlights your writing strengths and critical thinking skills.

Two recommendation letters: Recommendation letters must be from faculty members in your major, department, or college who can best assess your ability for academic research and your motivation to attend graduate school. Each letter must be signed and placed in a sealed envelope, with the faculty member's signature written across the sealed flap of the envelope. Ask each person writing a recommendation for you to send his/her letter directly to the McNair Program (at the address given at the beginning of the form) or directly to you, for submission with this form. Please identify the faculty members who will be sending recommendation letters on your behalf:

	Recommendation 1	Recommendation 2
Name		
Title/Position		
Department		
Telephone Number		

APPLICANT CHECKLIST

Only applicants whose application packets are complete will be considered for participation in the McNair Scholars Program. To be complete, application packets **must** include **all** items on this checklist:

- □ Have you completed, signed, and dated the application form?
- □ Have you attached a photocopy of you or your parents' most recent federal income tax return?
- □ Have you attached a photocopy of INS documentation, if you are not a United States citizen?
- □ Have you attached your personal statement?
- □ Have you attached your writing sample?
- □ Have you asked two faculty members to submit recommendation letters by the October 15, 201(deadline?

AUTHORIZATION, AFFIRMATION, AND SIGNATURE

The foregoing information is true to the best of my knowledge. I authorize the Ronald E. McNair Scholars Program of Lamar University to secure or release transcripts, standardized test results, and financial aid information from the Registrar's and Financial Aid Offices of the institutions I have attended.

Applicant's Signature & Date: _____

Please note how you heard about our program:

FACULTY RECOMMENDATION FORM

To be completed by applicant:

Due date: October 15, 201(Student's Name: _____

Graduate Discipline or Interest:

To be completed by the recommender:

The McNair Scholars Program is designed to prepare academically talented undergraduates for the rigors of graduate school. The applicant above is applying for admission to the McNair Scholars Program. We would appreciate your evaluation of the applicant's ability to carry on advanced studies, as well as of his/her scholarship, personality, character, integrity, and professional promise. Please feel free to attach a separate page that would help further assess the applicant's academic aptitude and preparation for graduate work and present academic performance in his/her area of concentration.

Please rate this applicant relative to other students whom you have known in this same field in recent years.

CRITERIA	Superior Top 5%	Above Average Top 20%	Average	Below Average	No Knowledge
Motivation for Proposed Program					
Analytical Skills					
Communication Skills – Oral					
Communication Skills – Written					
Ability to Work Independently					
Ability to Work with Others					
Potential for Graduate School Success					
Dependability and Work Ethic					
Self-Motivation/Initiation					
Personal Responsibility					

How long have you known this student and in what capacity?

What are your general impressions of this student?

Recommender's Name _____

Title/Department _____

Signature & Date _____

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What are your general impressions of this student?

Recommender's Name _____

Title/Department _____

Signature & Date ______

FOR OFFICIAL MCNAIR PROGRAM STAFF USE ONLY DO NOT WRITE ON THIS PAGE

LUID	Last Name			First	Name	Middle Initial
Date application	was received:			_		
Date application	was postmarked, if mailed:			_		
Date applicant v	vas notified of receipt of application:			_		
This applicant is	s… (Check all that apply):	☐ first	generatior	n/low income (m	ust be both) 🗌 underre	presented
Decision:						
Accept?		🗌 Yes		🗆 No		
Accept at a later	date?	🗌 Yes		🗆 No	If yes, date:	
Date applicant v	vas notified of status:			_		
Applicant's resp	oonse to invitation:	🗆 Ac	cepted	Declined		
Notes:						_